PHARMACARE NEWSLETTER

February 1, 2001
01-01

Web site: http://www.hlth.gov.bc.ca/pharme/index.html

PLEASE CIRCULATE AMONG DISPENSING STAFF

CHANGE IN BENEFIT STATUS:

Marinol® (dronabinol)

Pharmacare's Drug Benefit Committee (DBC) recently completed the review of dronabinol (Marinol®) for the new indication of AIDS-related anorexia. Marinol® is currently listed as a regular benefit for the treatment of nausea and vomiting associated with cancer chemotherapy.

The review of dronabinol completed by the Drug Benefit Committee (DBC) identified only one published randomized controlled trial comparing dronabinol with a placebo in patients with AIDS-related anorexia. Although the results of this trial indicated that there was a statistically significant increase in appetite, this increase did not produce weight gain. While 63% of the patients completed at least 4 out of the 6 weeks of the study, the number of patients who completed the entire 6-week study was not reported. There was also a greater incidence of central nervous system adverse events with dronabinol. Based on these findings, the DBC concluded there is insufficient evidence at the present time, that dronabinol provides a therapeutic advantage over a placebo in AIDS-related anorexia.

As a result, the DBC recommended that coverage for dronabinol be removed as a regular benefit. To allow coverage for dronabinol, as an antiemetic for cancer patients, the DBC recommended that this product be available as a restricted benefit only. Therefore, effective February 1, 2001, dronabinol will only be available as a restricted benefit through Pharmacare's Special Authority process, for the treatment of nausea and vomiting associated with cancer chemotherapy. To facilitate access to therapy for cancer patients, medical and radiation oncologists will be exempt from the Special Authority process.

LCA UPDATES:

Vancenase® Aer Nas Spray (SCH), DIN 422053
Alti-beclomethasone (KNR), DIN 872326

Due to the confirmed discontinuation of the above two products, please be advised that these products have been removed from LCA.

Nicotinic Acid (Niacin) (SDR) tabs 500mg, DIN 179469

Due to the discontinuation of the above F (Full) product, please be advised that Elite Niacin tabs 500mg, DIN 557412, by Vita Health, has now been changed from Partial to Full status.

AMENDMENTS TO LCA BOOKLET EFFECTIVE MAR 01, 2001:

Nifedipine caps: 5 & 10mg; please remove RDP designation as these are non-benefits subject to LCA only where a Special Authority exists.

Cilazapril: Please change RDP to REF status; this drug was included as a reference product effective November 1, 1999, and is eligible for full coverage.

Metformin tabs: 500 mg; please be advised that the LCA price has been changed from 0.0736 to 0.1249 and the following products have been changed from P (Partial) to F (Full) status:

2045710	NOP	Novo-metformin tab 500 mg
2148765	GPM	Gen-metformin tab 500 mg
2162822	NXP	Nu-metformin tab 500 mg
2167786	APX	Apo-metformin tab 500 mg

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Glyburide Tabs: 5 mg: please be advised that the LCA price has been changed from 0.0631 to 0.0700 and the following products have been changed form P (Partial) to F (Full) status:

2020742	NXP	Nu-glyburide tab 5 mg
1913689	NOP	Novo-glyburide tab 5 mg
0808741	GPM	Gen-glybe tab 5 mg
1913662	APX	Apo-glyburide tab 5 mg
2236734	PMS	PMS-glyburide tab 5 mg

DRUG UPDATES:

APO-Cisapride tabs 10mg

Cisapride is available through Health Canada's Special Access Program. Physicians wishing to prescribe cisapride are required to contact Health Canada to obtain special access approval.

Pharmacare will provide coverage on a prior approval basis only, upon receipt of a written request from the prescribing physician, along with supporting documentation from Health Canada.

All prescriptions for APO-Cisapride, 10 mg tablets should be dispensed with PIN 66124055.

Olanzapine (Zyprexa®)

The Drug Benefit Committee recently reviewed a re-submission for Olanzapine and has recommended that Olanzapine remain a restricted benefit for the treatment of schizophrenia and other related psychoses based on the current guidelines.

- treatment failure on one first-line neuroleptic
- any intolerable extrapyramidal side effect to a first-line neuroleptic (including extrapyramidal side effects that may interfere with compliance)
- acute dystonic reaction to any first-line neuroleptic
- any other idiosyncratic reactions to first-line drugs

BENEFITS

The following new products have been included as eligible Pharmacare benefits on Plans A, B, C, E and F

DIN	MAN	DRUG NAME	Short Term	Long Term	Plan G Eligible
2241820	PMS	PMS-Vancomycin (vancomycin HCl) vial 50mg	Y		
2241821	PMS	PMS-Vancomycin (vancomycin HCl) vial 1g	Y		
2243085	APX	APO Cimetidine oral soln 300mg/5ml		Y	

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NEW PRODUCTS CATEGORIZED TO LCA and/or RDP

The following new products under the Low Cost Alternative Program (LCA) / Reference Drug Program (RDP) have been included as eligible Pharmacare benefits on Plans A, B, C, E & F

DIN	MAN	DRUG NAME	FULL/ PARTIAL	LCA/RDP Price	Short Term	Long Term	Plan G Eligible	Eligible for Palliative Care
2242788	UNK	Captopril (captopril) tabs 12.5mg	P	0.2138		Y		
2242789	UNK	Captopril (captopril) tabs 25mg	P	0.3030		Y		
2242790	UNK	Captopril (captopril) tabs 50mg	P	0.5643		Y		
2242791	UNK	Captopril (captopril) tabs 100mg	P	1.0486		Y		
2241601	FER	Lipidil Supra (fenofibrate) tabs100 mg	P	0.7781		Y		
2241602	FER	Lipidil Supra (fenofibrate) tabs160 mg	P	1.2449		Y		
2237313	RXP	Rhoxal-Minocycline (minocycline HCl) caps 50mg	P	0.5516		Y		
2237314	RXP	Rhoxal-Minocycline (minocycline HCl) caps 100mg	P	1.0595		Y		
2242794	UNK	Metformin (metformin HCl) tabs 500mg	P	0.1249		Y		
2242793	UNK	Metformin (metformin HCl) tabs 850mg	P	0.2162		Y		
2243218	PMS	PMS Moclobemide tabs 150mg	P	0.4080		Y	Y	Y
2243219	PMS	PMS Moclobemide tabs 300mg	P	0.8531		Y	Y	Y

RESTRICTED BENEFITS

Special Authority Only (criteria follows)

DIN	MAN	DRUG NAME	Short Term	Long Term
2239893	APX	Apo-Terbinafine (terbinafine HCl) tabs 250mg		Y

Apo-Terbinafine (terbinafine HCl)

Coverage for oral terbinafine hydrochloride tablets is provided based on the following criteria:

- for the treatment of severe onychomycosis of the fingernails and/or of the toenails
  - (a) causing functional disability and
  - (b) confirmed by positive KOH examination and/or fungal culture indicating dermatophyte(s) of the nail performed in a licensed laboratory

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DRUGS UNDER REVIEW

The following drug submissions are currently under review by the Therapeutics Initiative©TI, Pharmacoeconomics Initiative and the Drug Benefit Committee of Pharmacare.

alendronate (FOSAMAX®), resubmission
ancestim (STEMGEN®)
azithromycin (ZITHROMAX®), resubmission
botulinium toxin (BOTOX®)
cabergoline (DOSTINEX®)
donepezil (ARICEPT®), resubmission
desmopressin (DDAVP®) tablets, new indication
diazepam rectal gel (DIASTAT®)
eposartan (TEVETEN®)
erythropoeitin (EPREX®), resubmission
etanercept (ENBREL®)
filgrastim (NEUPOGEN®), new indication
meloxicam (MOBIC®)
calcitonin nasal spray (MIACALCIN®)
moxifloxacin (AVELOX®)
perindopril (COVERSYL®)
pioglitazone (ACTOS®)
pramipexole (MIRAPEX®), resubmission
riluzole (RILUTEK®)
risedronate (ACTONEL®)
rivastigmine (EXELON®)
tobramycin (TOBI®), resubmission
verteporfin (VISUDYNE®)